Fill in this information to identify the case:	09/13/21	10:26:30 Desc Main
Debtor 1	_	
Debter 2		
Debtor 2 (Spouse, if filing)		
United States Bankruptcy Court for the:	District of (State)	
Case number	` '	
Official Form 410S2		
Notice of Postpetition Mo	rtgage Fees, Expenses	s, and Charges 12/
If the debtor's plan provides for payment of postpe debtor's principal residence, you must use this forr filing that you assert are recoverable against the de	n to give notice of any fees, expenses, and ch btor or against the debtor's principal residen	narges incurred after the bankruptcy
File this form as a supplement to your proof of clain	n. See Bankruptcy Rule 3002.1.	
Name of creditor:	Court claim no	o. (if known):
Last 4 digits of any number you use to identify the debtor's account:		
Does this notice supplement a prior notice of expenses, and charges?	f postpetition fees,	
☐ No		
☐ Yes. Date of the last notice://		
Part 1: Itemize Postpetition Fees, Expens	es, and Charges	
Itemize the fees, expenses, and charges incurred escrow account disbursements or any amounts p approved an amount, indicate that approval in par	reviously itemized in a notice filed in this case	e. If the court has previously
Description	Dates incurred	Amount
1. Late charges		(1) \$
2. Non-sufficient funds (NSF) fees		(2) \$
3. Attorney fees		(3) \$
4. Filing fees and court costs		(4) \$
5. Bankruptcy/Proof of claim fees		(5) \$
6. Appraisal/Broker's price opinion fees		(6) \$
7. Property inspection fees		(7) \$
8. Tax advances (non-escrow)		(8) \$
9. Insurance advances (non-escrow)		(9) \$
10. Property preservation expenses. Specify:		(10) \$
11. Other. Specify:		(11) \$
12. Other. Specify:		(12) \$

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid. See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1.

13. Other. Specify:_

14. Other. Specify:__

(13) \$ _____

(14) \$ _____

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Debtor 1						Case number (if known)	
	irst Name	Middle Name	Last Name				
Part 2: Si	ign Here						
The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.							
Check the appropriate box.							
☐ I am the creditor.							
☐ I am the	creditor's	authorized agent					
l declare u	ınder nen	alty of periury t	hat the info	rmation nr	ovided in	this claim is true and correct to the best	
of my kno	wledae. ir	nformation, and	reasonable	e belief.	oviaca iii	ting claim is true and correct to the best	
	3 .,	,					
n .							
	* Marianne Sarkin						
_						Date/	
	Signature						
Print:						Title	
	First Name	Midd	le Name	Last Name			
Company							
Company							
Address							
	Number	Street					
	City			State	ZIP Code		
Contact phone	()		_			Email	